



Miami-Dade County Disaster Assistance Employee (DAE) Program Application



Employee Information: (Complete all fields. If not applicable, write n/a)

First Name: _____ Last Name: _____ Home Address: _____
City: _____ Zip code: _____ Home #: _____ Mobile: _____
Job Title: _____ Department: _____ Work Address: _____
City: _____ Zip code: _____ Work#: _____ Fax#: _____
Pager: _____ Email: _____ Supervisor's Name: _____
Phone#: _____ Fax#: _____ Supervisor's Email: _____

Specialized skills, licenses & Certifications: (Check all that apply.)

Languages: (Circle extend of language knowledge.)

- ☐ English (Write/Speak/Both) ☐ Spanish (Write/Speak/Both) ☐ Creole (Write/Speak/Both)
☐ French (Write/Speak/Both) ☐ Portuguese (Write/Speak/Both) ☐ German (Write/Speak/Both)
☐ Sign Language Other: _____

Skills: ☐ General Office Skills ☐ General Computer Skills ☐ Computer Programming

Licenses & Certifications:

- ☐ EMT/Paramedic ☐ LPN/RN/CAN ☐ Mental Health Provider ☐ Child Care ☐ Class D Security License
☐ Building Contractor ☐ CPR/First Aid ☐ P.E. – E.I.T. ☐ CDL - Class: _____
☐ Fork Lift Operator ☐ Ham Operator ☐ Heavy Equipment Operator ☐ Other: _____

Supervisory Experience (Circle One): Yes or No

Prior Disaster Experience:

- ☐ Shelter Management ☐ Damage Assessment ☐ Call Taker/Phone Bank ☐ Volunteer Management
☐ Donations/Distribution Center ☐ Construction/Home Repair

Program Areas:

1. **Hurricane Evacuation Centers** – This role entails working in special needs evacuation centers during hurricanes and functioning in the capacity of shelter management staff.
2. **Special Needs Phone Operators** – This role entails working as a call taker in the Special Needs Support Center at the Emergency Operations Center (EOC).
3. **EOC Support Staff** – This role entails providing administrative support to the emergency management functional group coordinators or section leaders.
4. **Message Tracking and Mission Control Center (MTMCC)** – This role entails facilitating the flow of information throughout the EOC by distributing, faxing, photo copying documents for agency representatives in the EOC.
5. **Disaster Information & Referral Centers (DIRCs)** – This role entails providing disaster related information to the community at established DIRC locations.
6. **Neighborhood Emergency Assessment Teams (NEATs)** - This is a post disaster fieldwork, which involves accessing the human needs of affected citizens in disaster-impacted areas.
7. **Volunteers & Donations Call Center** – This role entails functioning in the capacity of call taker/phone operator in a call center setting that deals with unsolicited volunteers and donated goods/services.

Choose primary and secondary areas of interest:

Primary: _____ Secondary: _____

To be signed by employee's supervisor:

I understand that the County Manager has approved the use of county employees to work in disaster related roles in times of disaster pursuant to Miami-Dade County Code Chapter 8-B and that the above applicant is enrolled in the Disaster Assistance Employee (DAE) Program. As a DAE he/she will be considered an essential employee for the County's emergency operations efforts and once activated may be asked to work prior, during, and/or after a disaster. Furthermore, DAEs will not require written documentation for their release. Upon completion of DAE service, a timesheet indicating the hours worked in their disaster role will be forwarded to your department. I also understand that some training sessions will be provided and that this employee will be permitted to attend training.

Employee Signature

Date

Supervisor's Signature

Date

Fax application: (305) 468-5401 or mail to:

Office of Emergency Management, 9300 NW 41st St., Miami, FL 33178